U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2022

ELEVATION CERTIFICATEImportant: Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION					FOR INSU	RANCE COMPANY USE		
A1. Building Owner's Name					Policy Num	iber:		
JOHN ORR								
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 722 S. BEACH BLVD					Company f	NAIC Number:		
City				State			ZIP Code	
WAVELAND				Mississi	opi		39576	
A3. Property Descr TAX PARCEL # (16	•	nd Block Numbers, Ta 2.000)	x Parce	l Number, Le	gal Des	cription, etc	2.)	
A4. Building Use (e	e.g., Resider	ntial, Non-Residential,	Addition	, Accessory,	etc.)	RESIDEN'	ΓIAL	
A5. Latitude/Longit	ude: Lat. <u>N</u>	30-16-08-55	Long. V	V 89-23-00.5		Horizontal	Datum: NAD	1927 🗵 NAD 1983
A6. Attach at least	2 photograp	hs of the building if the	e Certific	ate is being u	used to	obtain flood	l insurance.	
A7. Building Diagra	ım Number	6						
A8. For a building v	with a crawls	pace or enclosure(s):						
a) Square foot	age of crawl	space or enclosure(s)			249.00	sq ft		
b) Number of p	ermanent flo	ood openings in the cra	awispac	e or enclosure	e(s) with	nin 1.0 foot	above adjacent gr	ade 0
c) Total net are	ea of flood o	penings in A8.b		0.00 sq ir	1			
d) Engineered	flood openir	ngs? ☐Yes ☐ N	lo					
A9. For a building w	ith an attacl	ned garage:						
a) Square foota	age of attach	ned garage		0.00 sq ff	t			
b) Number of p	ermanent flo	ood openings in the at	ached g	arage within	1.0 foot	above adja	acent grade 0	
c) Total net are	ea of flood o	penings in A9.b		0.00 sq	in			
d) Engineered	flood openin	gs? Yes N	lo					
ay Engineered need openings.								
	SE	CTION B - FLOOD I	NSURA	NCE RATE	MAP (F	FIRM) INF	ORMATION	
B1, NFIP Communi	=	Community Number		B2. County				B3. State
WAVELAND 28526	52			HANCOCK				Mississippi
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Effe	RM Panel ective/ vised Date	B8. FI Zone(B9. Base Flood E (Zone AO, us	Elevation(s) se Base Flood Depth)
28045C-0344	D	10-16-2009	10-16-2			VE		24
B10. Indicate the se	ource of the	Base Flood Elevation	(BFE) d	ata or base fl	ood dep	oth entered	in Item B9:	
☐ FIS Profile ☒ FIRM ☐ Community Determined ☐ Other/Source:								
B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 X NAVD 1988 Other/Source:								
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? 🔲 Yes 🗵 No								
Designation D			-	, - · · · · · · · · · · · · · · · · · ·	-			
a congridation to		L	35110					

FEMA Form 086-0-33 (12/19)

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the corresponding i	FOR INSURANCE COMPANY USE				
Building Street Address (including Apt., Unit, Suite, and/or E 722 S. BEACH BLVD	Policy Number:				
City State ZIP Code WAVELAND Mississippi 39576			Company NAIC Number		
SECTION C – BUILDING ELE	VATION INFORMAT	ION (SURVEY RE	EQUIRED)		
C1. Building elevations are based on: Construction		ling Under Constru	ıction* 🗵	Finished Construction	
*A new Elevation Certificate will be required when conc. Elevations – Zones A1–A30, AE, AH, A (with BFE), V			ΔF ΔR/Δ1_	-A30 AR/AH AR/AO	
Complete Items C2.a-h below according to the buildi Benchmark Utilized: USM NETWORK	ng diagram specified in Vertical Datum:	n Item A7. In Puert	o Rico only,	enter meters.	
Indicate elevation datum used for the elevations in ite	ms a) through h) below	v.			
☐ NGVD 1929 🗵 NAVD 1988 ☐ Other/S					
Datum used for building elevations must be the same	as that used for the B	FE.	Check t	the measurement used.	
a) Top of bottom floor (including basement, crawlspa	ce, or enclosure floor)		12.2 X	feet meters	
b) Top of the next higher floor			28.4 X	feet meters	
c) Bottom of the lowest horizontal structural member	(V Zones only)		26.5 X	feet meters	
d) Attached garage (top of slab)	,		N/A X	feet meters	
e) Lowest elevation of machinery or equipment servi (Describe type of equipment and location in Comr	cing the building nents)		29.5 X	feet meters	
f) Lowest adjacent (finished) grade next to building	(LAG)		11.9	feet meters	
g) Highest adjacent (finished) grade next to building	(HAG)		12.0	feet meters	
h) Lowest adjacent grade at lowest elevation of decl structural support	or stairs, including		12.2 X	feet meters	
SECTION D – SURVEYOR,	ENGINEER, OR ARC	HITECT CERTIF	ICATION		
This certification is to be signed and sealed by a land survivors of the certification on this Certificate represents statement may be punishable by fine or imprisonment und	mv best efforts to inter	pret the data availa	y law to certi able. I under	ify elevation information. stand that any false	
Were latitude and longitude in Section A provided by a lic			Che	eck here if attachments.	
Certifier's Name	License Number				
DUKE LEVY	01722			OUKE LEVY	
Title SURVEYOR				360 PROSE	
Company Name			\dashv //	ENGINEER OF AND	
DUKE LEVY & ASSOCIATES				E PE7448 ≥	
Address 4412 LEISURE TIME DRIVE			1077	Here & Q	
City DIAMONDHEAD	State Mississippi	ZIP Code 39525		OF MISSIS	
Signature	Date 05-18-2021	Telephone (228) 343-9691	Ext.		
Copy all pages of this Elevation Certificate and all attachmen	nts for (1) community of	ficial, (2) insurance	agent/compa	any, and (3) building owner.	
Comments (including type of equipment and location, per WO # 2020-106 BENCHMARK - A MAG NAIL WITH A DISK WAS SET IN ELEVATION ON TOP OF THE MAG NAIL IS (4.70') FEE LOCATED ON THE EAST SIDE.THE ENCLOSURE UND	THE CENTERLINE C	HINERY SERVICIN	NG THE HO	ME IS AN A/C UNIT	

ELEVATION CERTIFICATE

OMB No. 1660-0008 Expiration Date: November 30, 2022

TO TANK I who a green populate corresponding informat	tion from Sectio	n A.		FOR INSURANCE C	OMPANY USE
IMPORTANT: In these spaces, copy the corresponding information from Section A. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.				Policy Number:	
Building Street Address (including Apt., Onlit, State, and/o/ Biog. 116 722 S. BEACH BLVD			1		
State	ZIP Co	de		Company NAIC Num	nber
City State WAVELAND Mississippi	39576				
SECTION E PUIL DING ELEVATION I	NFORMATION	(SURV	EY NOT I	REQUIRED)	
FOR ZONE AO AND A	ZONE A (WITH	יםוטע	rL)		
For Zones AO and A (without BFE), complete Items E1–E5. If the Complete Sections A, B,and C. For Items E1–E4, use natural grade enter meters.	, il avallabic. Oil	JOIL WIO	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		-
enter meters. E1. Provide elevation information for the following and check the a the highest adjacent grade (HAG) and the lowest adjacent grade.	ppropriate boxes de (LAG).	to sho	w whether	the elevation is abov	e of below
a) Top of bottom floor (including basement, crawlspace, or enclosure) is] feet	meters	s above or	below the HAG.
b) Top of bottom floor (including basement, crawlspace, or enclosure) is	-		meters		
E2. For Building Diagrams 6–9 with permanent flood openings pro	vided in Section	A Items	s 8 and/or	9 (see pages 1–2 of	Instructions),
the next higher floor (elevation C2.b in the diagrams) of the building is			meter	s 🔲 above or 🔲	below the HAG.
E3. Attached garage (top of slab) is		feet	meter	s above or	below the HAG.
E4. Top of platform of machinery and/or equipment servicing the building is			meter meter		
HOOD PLANT III ALL STATE OF THE PARTY OF THE	DIRFIOWER THOU	Jour on			mmunity's n in Section G.
SECTION F - PROPERTY OWNER (OR O	WNER'S REPRI	SENT	ATIVE) CE	ERTIFICATION	
The property owner or owner's authorized representative who comcommunity-issued BFE) or Zone AO must sign here. The statement Property Owner or Owner's Authorized Representative's Name	nts in Sections A	, B, and	I E are cor	rect to the best of my	/ knowledge.
Address	City	***************************************	SI	ate	ZIP Code
Signature	Date		Te	elephone	
Comments				<u> </u>	
Commence					
				Check her	re if attachments.
	-llviaus aditic				Form Page 3 o

ELEVATION CERTIFICATE

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IMPORTANT: In these spaces, copy the corre	FOR INSURANCE COMPANY USE					
Building Street Address (including Apt., Unit, Su 722 S. BEACH BLVD	Policy Number:					
City WAVELAND	ZIP Code 39576	Company NAIC Number				
SECTIO	N G - COMMUNITY INFOR	MATION (OPTIONAL)				
The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8–G10. In Puerto Rico only, enter meters.						
engineer, or architect who is authorize data in the Comments area below.)	engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation					
G2. A community official completed Section or Zone AO.	on E for a building located in	Zone A (without a FEM	IA-issued or community-issued BFE)			
G3. The following information (Items G4–	G10) is provided for commur	nity floodplain managen	nent purposes.			
G4. Permit Number	G5. Date Permit Issued		Date Certificate of Compliance/Occupancy Issued			
G7. This permit has been issued for:	New Construction Subs	stantial Improvement				
G8. Elevation of as-built lowest floor (including of the building:	y basement)	fee	t meters Datum			
G9. BFE or (in Zone AO) depth of flooding at the building site: feet meters						
G10. Community's design flood elevation:		fee	et meters Datum			
Local Official's Name Title						
Community Name	Tele	phone				
Signature	Dat	9				
Comments (including type of equipment and location, per C2(e), if applicable)						
	, ,					
			Check here if attachments.			

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

See Instructions for Item A6.

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy the	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 722 S. BEACH BLVD			Policy Number:
City WAVELAND	State Mississippi	ZIP Code 39576	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

FRONT AND LEFT SIDE Photo One Caption

Clear Photo One



Photo Two

FRONT AND RIGHT SIDE Photo Two Caption

Clear Photo Two

BUILDING PHOTOGRAPHS

ELEVATION CERTIFICATE

Continuation Page

OMB No. 1660-0008 Expiration Date: November 30, 2022

IMPORTANT: In these spaces, copy th	FOR INSURANCE COMPANY USE		
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 722 S. BEACH BLVD			Policy Number:
City	State	ZIP Code	Company NAIC Number
WAVELAND	Mississippi	39576	

If submitting more photographs than will fit on the preceding page, affix the additional photographs below. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8.



Photo Three

Photo Three Caption REAR AND RIGHT SIDE

Clear Photo Three



Photo Four

Photo Four Caption REAR AND LEFT SIDE

Clear Photo Four

NON-CONVERSION AGREEMEN A Kellar Bahcock County

with

CITY OF WAVELAND, MISSISSIPPI

This DECLARATION made this 14th day of July 20 21
This DECLARATION made this 14th day of July 20 Z1, By John Orr (OWNER) having an address at 722 S. Beach Blvd
WITNESSETH: WHEREAS, the Owner is the record owner of all that real property located at 722 S. Beach Blvd In the City of Waveland, MS, in the County of Hancock, designated in the Tax Records as 1628-0-10-132.000
WHEREAS, the Owner has applied for a permit to place a structure on that property that has an enclosed area below the base flood elevation constructed in accordance with the requirements of Article No. 5, Section "B" paragraph 5 of Waveland Floodplain Management Ordinance of Number 342 and under Permit Number 200349.
WHEREAS, the Owner agrees to record this DECLARATION and certifies and declares that the following covenants, conditions and restrictions are placed on the affected property as a condition of granting the Permit, and affects rights and obligations of the Owner and shall be binding on the Owner, his heirs, personal representatives, successors, future owners, and assigns.
WINDERY COMMITTEE TO THE PROPERTY OF THE PROPE
UPON THE TERMS AND SUBJECT TO THE CONDITIONS, as follows: Hancock County I certify this instrument was filed on the condition of the cond
1. The structure or part thereof to which these conditions apply and recorded in Deed Book
2. At this site, the Base Flood Elevation is $24+1$ feet above mean and the elevation of Elevation is $24+1$ feet above mean and the elevation of Elevation is $24+1$ feet above mean and the elevation of Elevation is $24+1$ feet above mean and the elevation of Elevation is $24+1$ feet above mean and the elevation is $24+1$ feet a
3. Enclosed areas below the Base Flood Elevation shall be used solely for parking of vehicles, limited storage, or access to the building. All interior walls, ceilings and floors below the Base Flood Elevation shall be unfinished or constructed of flood
resistant materials. Mechanical, electrical or plumbing devices shall not be installed below the Base Flood Elevation.
 The walls of the enclosed areas below the Base Flood Elevation shall be equipped and remain equipped with openings as shown on the Permit.
5. The jurisdiction issuing the Permit and enforcing the Ordinance may take any appropriate legal action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.
6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.
7. Other conditions:
In witness whereof the undersigned set their hands and seals this
John Orp (Print) Timothy A. Kellar (Print)
Chancery Clerk By: Weddy Hoo Signature)
OWNER WITNESS V

*** Certified Copy Page ***

I, Timothy A Kellar, Chancery Clerk, do hereby certify that the foregoing is a FULL, TRUE and CORRECT copy of the Instruments(s) herewith set out as same appears of record in: Deed BOOK - 2021, AT PAGE - 11378 in said court.

Witness my hand and seal this 14 Day of July, 2021.

Timothy A Kellar

Chancery Clerk

Hançock County, MS

DC:

Printed: 07-14-2021 02:51:52 PM Optical file reference: D2C72.7E5

National Flood Insurance Program V-ZONE CERTIFICATE

Name: John Orr

Policy Number (Insurance Co. Use):

Building Address or Other Description: 722 S Beach Blvd

City: Waveland

State: Mississippi

Zip Code: 39576

SECTION I: Flood Insurance Rate Map (FIRM) Information

Community Number: 285252 Panel Number: 28045C 0344 Suffix: D Date of FIRM Index: 10/16/09 FIRM Zone: VE24

SECTION II: Elevation Information

Note: This Certificate does not substitute for an Elevation Certificate

1.	Elevation of the Bottom of Lowest Horizontal Structural Member26.0* feet (NAVD88)
2.	Base Flood Elevation (BFE)
	Elevation of Lowest Adjacent Grade
	Approximate Depth of Anticipated Scour/Erosion used for Foundation Design 1.0 feet
5.	Embedment Depth of Pilings or Foundation Below Lowest Adjacent Grade (refusal)

SECTION III: V-Zone Certification Statement

Note: This section must be certified by a registered engineer or architect

I certify that I have developed or reviewed the structural design, plans, and specifications for construction and that the design and methods of construction to be used are in accordance with accepted standard of practice for meeting the following provisions:

- The bottom of the lowest horizontal structural member of the lowest floor (excluding piles and columns) is elevated to or above the BFE; and
- The pile and column foundation and structure attached thereto is anchored to resist flotation, collapse, and lateral movement due to the effects of the wind and water loads acting simultaneously on all building components. Water loading values used are those associated with the base flood. Wind loading values used are those required by the applicable State or local building code. The potential for scour and erosion at the foundation has been anticipated for conditions associated with the base flood, including wave action.

SECTION IV: Breakaway Wall Certification Statement

Note: This section must be certified by a registered engineer or architect When breakaway walls exceed a design safe loading resistance of 20 pounds per square foot

I certify that I have developed or reviewed the structural design, plans, and specifications for construction and that the design and methods of construction to be used for the breakaway walls are in accordance with accepted standards of practice for meeting the following provisions:

- Breakaway wall collapse shall result from a water load less than that which would occur during the base flood; and
- The elevated portion of the building and supporting foundation system shall not be subject to collapse, displacement, or other structural damage due to the effects of wind and water loads acting simultaneously on all building components (wind and water loading values to be used are defined in Section III).

SECTION V: Certification

Signature below certifies: X Section III; Section IV

Certifiers Name: Stuart Williamson, P.E., C.F.M.

Company Name: Compass Floodplain Consultants, LLC

License Number: 13199

Title: Civil Engineer Address: P.O. Box 3145

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City: Bay St Lquis

State: Mississippi

Telephone Number: Home Builders Guide to Coastal Construction